

MARSOC Commanding Officer's Screening Checklist CRITICAL SKILLS OPERATOR

Operational Forces Bravo CSO/OFB

Application Instruction Sheet

NOTE: Be sure to read each section carefully to ensure the accuracy and completeness of this checklist.

- <u>PERSONAL DATA</u>: Fill in all boxes pertaining to personal data. Do not leave any boxes unmarked. If the data does not apply then indicate by marking "NA" in the appropriate box. *Include area code for unit DSN phone number.
- ASSESSMENT & SELECTION (A&S) AVAILABILITY: Unit leaders, based on your unit's operational tempo, please recommend /select the best time for your Marine to attend A&S Preparatory & Orientation Course and A&S. The A&S Prep/Orient Course is 21 days and MANDATORY for all Sgts & below; VOLUNTARY for Officers and SNCOs. Each A&S is approximately three (3) weeks in length. **A&S Prep/Orient Course combined with an A&S is approximately 40 days**.
- <u>PREREQUISITE/REQUIREMENTS/QUALIFIED</u>: Read carefully each *PREREQUISITE* then assess each of the *REQUIREMENTS* as it relates to the applicant. In the *QUALIFIED* column mark **YES** if the prerequisite is met or mark **NO** if the prerequisite is not met.

REQUIRED SIGNATURES:

Battalion/Squadron Sergeant Major (Enlisted only) Commanding Officer (Officer/Enlisted)

NOTE TO SENIOR LEADERSHIP: Your signature on this checklist represents the validation and accuracy of all entries as well as the willingness to provide qualified applicants with the opportunity to attend the A&S Preparatory & Orientation Course (21 days) mandatory for all Sgts and below, voluntary for Officers and SNCOs and A&S in a temporary assigned duty (TAD) status for approximately three weeks. Marines who are selected from A&S will be returning to their command to await assignment orders to MARSOC upon eligibility of PCA/PCS orders. Please understand that any disqualifying mark does not discontinue the administrative process of the checklist as it is the responsibility of the applicant to ensure the return of the fully completed checklist with appropriate command signatures. MARSOC Recruiting and Screening Branch is the final determination authority as to the qualification status of the applicant.

Additional required documents:

- -Marine Corps Total Force System (MCTFS) Basic Individual Record (BIR), Basic Training Record (BTR), Record Of Service (ROS), and Legal Report (D119), and Education page.
- -The following pages from your Service Record Book (SRB): NAVMC 10132 (UNIT PUNISHMENT BOOK), NAVMC 118(11) (ADMINISTRATIVE REMARKS) and NAVMC 118(13) (RECORD OF CONVICTION BY COURT-MARTIAL), even if blank.
- -Complete Naval Special Warfare/Special Operations (NSW/SO) Duty Medical Examination physical prior to marking medical/dental prerequisite box.
- -Complete MARSOC Financial Worksheet
- -Complete MARSOC Clearance Screening Questionnaire with adjudicated eligibility of SECRET in JPAS or command NACLC with submitted date annotated.
- -Any waiver for GT scores (100-104) or NJP history requires three letters of recommendations.

Unit Career Planner (CARPLNR) should assist applicants in the administrative process of completing & verifying the required checklist(s) data entries prior to submitting to the Battalion/Squadron Sergeant Major & Commanding Officer. Return all fully completed and signed documents to the appropriate MARSOC Recruiting & Screening office by either scanning & emailing as attachments or by faxing to the appropriate MARSOC POC: Camp Lejeune & Okinawa FAX #: (910) 451-3760 or Camp Pendleton & Hawaii FAX #: (760) 763-7782.

Forward all inquiries to the MARSOC Recruiting and Screening Branch:

-East Coast (Okinawa) Recruiting Branch: (910) 451-3123 / DSN: 751-3123

E-mail: MARSOC_recruiting@usmc.mil

-West Coast (Hawaii) Recruiting Branch: (760) 763-5101 / DSN: 365-5101

E-mail: MARSOC_recruiting_we@usmc.mil

-MARSOC Recruiting and Screening Branch Toll Free Number: 1-888-93-MARSOC (627762)



PRIVACY ACT STATEMENT

In accordance with the Privacy Act of 1974 (Public Law 93-579), this notice informs you of the purpose for collection of information on this form. Please read it before completing the form.

AUTHORITY: 10 U.S.C. 5041, Headquarters, Marine Corps, and E.O.9397 (SSN)

PRINCIPAL PURPOSE: Information collected by this form will be used to screen Marines for MARSOC Critical Skills Operator/Operational Forces Bravo (CSO/OFB) Billets.

RETENTION: The collected information will be maintained by MARSOC Recruiting and Screening Branch with limited access. Records in this file system will only be retrieved by Recruiting and Screening Personnel and Marine Special Operations School personnel or designated personnel within MARSOC that must review this information. This information will be deleted or destroyed when no longer needed.

ROUTINE USES: None other than the blanket routine uses established by the Department of Defense Privacy Policy Office and posted at http://www.defenselink.mil/privacy/notices/blanket-uses.html

DISCLOSURE: Providing information on this form is voluntary. However, failure to provide may result in you not being successfully screened & assigned to and A&S or serve as a Critical Skills Operator.



Last		I	First	MI
SSN	Allergie	es		
Rank	MOS	I	DOB	Blood Type
Phone	E-Mail	(.Mil or Civilian)		
Unit		U	Unit Phone	

Assessment & Selection (A&S) Availability Command: Based on your unit's operational tempo, please recommend/select the best time for your Marine to attend A&S Preparatory & Orientation Course and A&S. The A&S Prep/Orient Course is 21 days and MANDATORY for all Sgts & below; VOLUNTARY for Officers & SNCOs. Each A&S is approximately three (3) weeks in length.

A&S Prep/Orient Course combined with an A&S is approximately 40 days

FALL	WINTER	SPRING
September/October	January/ February	April/ May

Screening Checklist must be completed by the applicant's Chain of Command, to include a Command Endorsement. Applicants will also attach a copy of their Marine Corps Total Force System (MCTFS) Basic Individual Record (BIR), Basic Training Record (BTR), Record Of Service (ROS), Legal Report (D119), and Education Page. Also, include the following pages from applicant's Service Record Book (SRB): NAVMC 10132 (UNIT PUNISHMENT BOOK), NAVMC 118(11) (ADMINISTRATIVE REMARKS) and NAVMC 118(13) (RECORD OF CONVICTION BY COURT-MARTIAL), **even if blank**. The completed checklist with all supporting documentations will be forwarded to the MARSOC Recruiting Branch for final disposition.

PREREQUISITE	REQUIREMENTS	QUALIFIED
Volunteer	Is the Marine a volunteer or has been directed by MMEA/MMOA.	VOLUNTEER
		□YES □NO
	(You may mark more than one box)	DIRECTED
		□YES □NO
Citizenship	Is the Marine a U.S. Citizen? (If not, has Marine applied for citizenship?).	□YES □NO
Rank:	Applications from LCpl – SSgt & 1stLt – Maj will be considered. All applicants	□YES □NO
	must have between 2-17 years of active service.	
DOR:		
Pro/Con Marks:	LCpl-Cpl - average marks in Service. (Minimum 4.3 / 4.3)	□YES □NO
Integrity, Maturity, and	Marine demonstrates integrity, maturity, and sound judgment. Can be trusted to	□YES □NO
Judgment	act in an unsupervised capacity.	
GT Score:	105 or above. Scores may be waived to 100. Waivers require 3 letters of	□YES □NO
	recommendation. Exceptionally qualified applicants will be considered on a case by case basis.	
Courts Martial	No Courts Martial convictions.	□YES □NO
NJP	No NJP within the last 12 months or no more than 2 in current contract.	□YES □NO
	No NJP as SNCO/Officer .	
Page 11	No derogatory Page 11 entries within the last 12 months.	□YES □NO
Drug Related Incidents	SNCO & Officer's with derogatory Page 11 entries require a waiver. No incidents of drug abuse or possession.	□YES □NO
Alcohol Related Incidents	No alcohol-related incidents within 12 months or more than 2 in service.	□YES □NO
Adverse Fitness Report(s)	No adverse fitness reports within 12 months.	□YES □NO
Family Status	This should be viewed as a precaution to avoid potential family hardships due to	□YES □NO
	OPTEMPO. Verify Marine is not currently enrolled in a command-directed	
Military spouse	stress/anger management course or undergoing marital counseling. Special	□YES □NO
	attention will be given to Marines who are separated or undergoing divorce	T. CNIM
Number of Dependents:	proceedings. Marines legally separated or pending divorce may be disqualified. Verify any legal proceedings and comment on status. Additional screening	Is SNM enrolled in the EFMP
	maybe required for Marines who have active duty spouses and dependents in	☐YES ☐NO
	the Exceptional Family Member Program.	
	me americani a minij razmora a reganne	



(Continued)

PREREQUISITE	REQUIREMENTS	QUALIFIED
Medical and Dental qualified	The Marine must be medically fit. Must have a current NSW/SO Duty Medical	□YES □NO
MARGOGM I' I G	Examination (U.S. Navy NAVMED P-117, Manual of the Medical	
MARSOC Medical Screening Form completion date:	Department, Chapter 15, Sections 32-61, 102, 105, and 136) recorded in medical record. (Medical record will be screened upon check-in to A&S). Any	
roim completion date.	medical documentation indicating problems with stress or psychological	
	dysfunction is not necessarily a disqualifying factor but must be identified.	
	Complete attached medical screening form. Medical Physician stamp or initials required.	
	Contact MADSOC Descrition Medical Linion for in antique and aid in	
	Contact MARSOC Recruiting Medical Liaison for inquiries or to aid in facilitating the medical screening process at (910) 440-0174	
Current PFT Date:	Must possess a minimum PFT score of 225. A First Class PFT score must be	
	recorded in MCTFS or have a current PFT roster signed by an official PFT	
Score:	proctor. At a minimum, the PFT score must be within the last 12 months.	□YES □NO
	CLASS 9 PFT will NOT be accepted	
Financially Responsible	Marine has demonstrated an ability to manage personal financial affairs with	
	maturity and judgment. Does not exhibit a pattern of indebtedness or frequently	□YES □NO
	write checks without sufficient funds. Complete attached financial worksheet.	
16 - 16 - 1 - 1	Net funds available \$500.00	
Meets Minimum Obligated Service	Marine must have a minimum of 3 months remaining on current contract or by extension to participate in the scheduled A&S and, if selected , be willing to	□YES □NO
Service	reenlist or extend to meet 60 months CSO obligated assignment tour at	
EAS:	MARSOC. Officers must be willing to execute required obligated assignment	
	tour as a CSO.	
Eligible to PCS/PCA	Used to determine assignment date to MARSOC. Marines cannot be assigned to	
Б.,	MARSOC unless they are eligible to rotate or authorized earlier by MMEA /	□YES □NO
Date:	MMOA.	
	Career Planner verification required for enlisted	
Meets Personal Appearance and	Marine is within the Marine Corps height and weight standards, per MCO 6110.3	
Height and Weight Standards	(Marine Corps Body Composition & Military Appearance Program). No	
Height:	unresolved history of assignment to body composition or personal appearance programs is authorized.	□YES □NO
Weight:	programs is authorized.	
Body Fat: Security Clearance	Marine must have an adjudicated eligibility Secret in JPAS or command NACLC	
Level:	submitted date. Any disqualifying attributes must be annotated below.	□YES □NO
Le vei.		
Swim Qual Class:	Demonstrate & perform at A&S the ability to properly conduct abandon ship drill	
	6 meter platform, 300 meter swim (breast or side stroke) in utilities, tread water	□YES □NO
Requal Date:	for 10 min while in utilities, & transition to survival float using blouse or trousers for 5 min.	
Military Schools or Special	Does the Marine possess any experience, cultural, language, or special skills that	
Skills	may considered him as an exceptional candidate for assignment to MARSOC.	□YES □NO
	List school/skill levels below with qualifying dates, if applicable.	
SCHOOLS/SPECIAL SKILLS	NOT LISTED IN BTR	DATE:



(Continued)

UNIT'S COMMENDATORY OR DISQUALIFYING **MARSOC STAFF WILL MAKE FINAL DETERMINA MARSOC.**		SIGNMENT TO
MARSOC.		
Career	r Planner Points Of Contact	
Printed Name/Rank:		
E-mail:	Phone Number:	
E-mail:	Phone number:	
Battalion / Squadron SgtMaj's Printed Name	Battalion / Squadron SgtMaj's Signature	Date
E-mail:	Phone Number:	
E-mail:	Phone Number:	
Commanding Officer's Printed Name /Rank	Commanding Officer's Signature	Date
E-mail:	Phone Number:	



MARSOC FINANCIAL WORKSHEET INSTRUCTIONS

The purpose of this worksheet is to determine a Marine's financial stability. It is in the Marine's best interest to be as accurate as possible with this form.

- 1. Name Include Marine's Full Name and Rank
- 2. # of Dependents total number of dependents
- 3. **Date** date worksheet was completed
- 4. Unit Name of Unit Marine is currently assigned to
- 5. **Gross Monthly Income** total income BEFORE taxes
- 6. Spouse's Current Employment Name of Spouse's Current Employer
- 7. **Spouse's Gross Monthly Income** Spouse's Income BEFORE taxes
- 8. **Housing** put an X in the box that corresponds with your housing situation (Own/Rent/Other(Specify).
- 9. **Checking Account Balance** can be individual or joint depending on what income you want to have considered.
- 10. Savings Account Balance can be individual or joint depending on what income you want to have considered.
- 11. **Outstanding Debts** this is designed to give us an idea of the Marine's debt to income ratio. For each of the sections (a-d and f-i) list the TOTAL amount owed. Block 8e. is the total of blocks 8a-d and Block 8j. is the total of blocks 8f-j. Block 8k. is the total of block 8e. + 8j.

Income/Expenditure Comparison. This section compares Marine's total Monthly Income against their total Monthly deductions/expenditures.

12. Monthly Income Blocks a-d. The amounts listed on the Marine's LES.

Block 12e. is the sum of blocks 12a-d.

- 13. **Total Monthly Deductions**. **Blocks a-o**. List monthly payments for each expenditure. **Block p**. is the sum of all monthly expenditures.
- 14. **Mandatory Monthly Deductions**. **Blocks a-l**. Monthly deductions listed on the Marine's LES. If the Marine does not pay that deduction, enter a 0.

Block m. is the sum of blocks a-l.

- 15. **Total Income**. Marine and spouse's income (if applicable).
- 16. **Total Expenditures**. Sum of blocks 13p and 14m.
- 17. **Net Income**. Sum of block 15 minus block 16.
- 18. Remarks. Explanation of Marine's circumstances, if warranted.
- 19. Marine should sign and date.
- 20. Recruiting Branch will circle Qualified/Unqualified in this block and explain a remark of Unqualified in the remarks section below.
- 21. Recruiting Branch will sign and date.

FINANCIAL WORKSHEET									
1. Name (Last, First, Middle)			2. # of De	ependents		3. Date			
				_					
4. Unit					5. Gross M	onthly In	ncome		
6. Spouse's Curre	ent Emplo	yment				7. Spouse's	Gross Mo	onthly Ind	come
8. Housing	a. Own	b. Rent	Other (Spe	cify	9 Chocki	ng Acct Bal		10. Savi	ngs Acct
o. Housing	a. Own	D. Rent	,		9. CHECKI	ilg Acct Bai		Dai	
Check One									
11. OUTSTANDING D	EBTS								
	Total	Owed						1	
a. Mortgage					cal Bills			_	
b. Student Loans			1 ⊢—		Loans			_	
c. Credit Card					lit Card			4	
d. Other (Specify)			-		(specify)			4	
e. Total				. Tota					
					L INDEBTEDN				
10 11 7			INCOME/EXE	PENDIT	URE COMPA	RISON			
12. Monthly Incom	ne				12 222	···· • • • • • • • • • • • • • • • • •		550	
a. Base Pay						NT MONTHLY E	XPENDITU.	RES	
b. BAS c. SDA Pay					a. Housing b. Car #1	9			
d. Other Income					c. Car #2				
e. Total					d. Auto I	ns			
e. iotai					e. Personal				
14. Mandatory Mor	thly Ded	uctions			f. TSP/IR				
a. FITW					g. Credit				
b. Social Security				h. Credit					
c. Medicare	1				i. Studen				
d. SITW					j. Loans				
e. SGLI					k. Medical	l Bills			
f. Family dental					1. Food				
g. Charity					m. Utilit:	ies			
h. Allotments					n. Transpo	rtation Costs			
i. Advance Pay					o. Other				
k. Child Support/Alimony				p. Total					
1. Other (Explain)								,	
m. Total									
15. Total Income			16. Total	Ехре	nditures		17. Net	Income	
18. Remarks			ļ						
10. Remarks									
10 0:	Manina /D								
19. Signature of	Marine/D	ate							
20. Based on my a					_	Qualified/U	Inqualifi	ed. The	finding
of UNQUALIFIED is	ampilii	ea in th	e remarks	ретом					
Remarks									
21. Recruiter Sig	nature								



MARSOC RECRUITING CLEARANCE SCREENING QUESTIONNAIRE INSTRUCTION FORM

IMPORTANT: This questionnaire is to be filled out in the presence of the local Security Manager or Assistant Security Manager only.

- Answer all questions. Any question not answered will result in an incomplete questionnaire which will cause a delay in the processing of the applicant file and may also be grounds for disqualification.
- If in answering questions 2 12 with a yes, provide an explanation in the remarks portion of this questionnaire. This will not necessarily be a disqualifying factor in obtaining a clearance, or cause for non-assignment to Assessment and Selection.
- If submission of the document will be in digital format as an attachment on an e-mail, then the local Security Manager or Assistant Security Managers typed name in the appropriate signature blocks will be acceptable.
- Be sure to forward all questions to the MARSOC Recruiting & Screening Team via phone call or email:

EAST COAST

U.S. MARINE CORPS FORCES SPECIAL OPERATIONS COMMAND Recruiting & Screening Team Bldg 321 H St. Rm. 126 Camp Lejeune, NC 28542

Office: (910) 451-3349/3123 Fax: (910) 451-3760

E-mail: MARSOC_recruiting@usmc.mil

WEST COAST

U.S. MARINE CORPS FORCES SPECIAL OPERATIONS COMMAND Recruiting & Screening Team Bldg. 530342T Camp Horno Camp Pendleton, CA 92055

Office: (760) 763-5101/5102 Fax: (760) 763-7782

E-mail: MARSOC_recruiting_we@usmc.mil

MARSOC Recruiting & Screening Branch Toll Free Number: 1-888-93-MARSOC (627762)



MARSOC RECRUITING CLEARANCE SCREENING QUESTIONNAIRE

The purpose of this questionnaire is to assess and establish your eligibility to obtain a security clearance. Any assignment to MARSOC will potentially expose you to classified materials. This questionnaire is an inquiry into your loyalty, character, trustworthiness and reliability for an appointment to a sensitive position or position of trust.

1.	PRELIMINARY Do you understand the reasons for, and the importance of, the state of	his interview?					
	C YES C NO						
2.	ALLEGIANCE TO THE UNITED STATES Have you had any involvement in any act of sabotage, espicoverthrow the government of the United States or alter the formula YES ONO	onage, treason, terrorism, sedition, or other act whose aim is to form of government by unconstitutional means?					
3.	FOREIGN INFLUENCE Are any members of your immediate family, or close friends not a U.S. Citizen?						
	C YES C NO						
4.	PERSONAL CONDUCT Has there been any unfavorable occasions concerning perso punishment, adverse page 11 entries, or traffic citations?	onal conduct? Example: Court-martial , non-judicial					
	C YES C NO						
5.	SEXUAL BEHAVIOR Have you committed any sexual criminal offense? YES NO						
6.							
υ.	Do you now, or have you had a history of indebtedness?	NCIAL CONSIDERATIONS I now, or have you had a history of indebtedness?					
	O YES O NO						
7.	ALCOHOL CONSUMPTION Have you been treated for alcoholism, alcohol abuse or been	n charged with any alcohol related incidents?					
	C YES C NO						
8.	DRUG INVOLVEMENT Have you or any family member experimented in the use/sa	le of cannabis, opium, narcotic or any other dangerous drugs					
	C YES C NO						
9.	CRIMINAL CONDUCT Have you been found guilty of criminal conduct involving a						
	a. Force, coercion, or intimidation?	C YES NO					
	b. Firearms or explosives?	O YES O NO					
	c. Dishonesty of false statements?	C YES C NO					
	d. Obstruction or corruption of a government function?	C YES O NO					
	e. Violence against persons or property?	C YES C NO					
10.	SECURITY VIOLATIONS Have you intentionally disclosed classified material to unau	thorized persons?					
11	O YES O NO						
11.	OUTSIDE ACTIVITIES Are you, any of your immediate family, or close friends affit overthrow of the U.S. government by any unconstitutional results.						
	C YES C NO						

10			TION TECHNOLOGY	
	VIII SH	CHINHURNIA		

Have you failed to comply with any rules, guide or information?	elines, or regulations pertaining to protecting classified systems, networks,
O YES O NO	
<u> </u>	
HAVE NOT INTENTIONALLY PROVIDED ANY	ED ALL QUESTIONS TO THE BEST OF MY KNOWLEDGE, AND Y INCORRECT OR MISLEADING INFORMATION. I HAVE 'ERVIEW TO CERTIFY THE ANSWERS AS MY OWN AND THAT
APPLICANT SIGNATURE:	DATE:
(UNIT SECU	URITY MANAGERS USE ONLY)
U.S. CITIZENSHIP VERIFIED: O YES O NO	
BASED ON INTERVIEW, IS THE APPLICANT ROOM YES ONO	RECOMMENDED FOR ACCESS TO CLASSIFIED MATERIALS?
SECURITY MANAGER – TYPE / PRINT NAME:	
VERIFICATION SIGNATURE:	DATE:
REMARKS:	



MARSOC MEDICAL SCREENING FORM

- 1. **Purpose**. To ensure all candidates are medically qualified and cleared prior to reporting and commencing training.
- 2. **Requirements.** NSW/SO Duty Medical Examination physicals must be signed by an Undersea Medical Officer (UMO). The MARSOC Medical Screening Form MUST be included on top of Section II of the applicant's medical health record prior to reporting.

Assessment and	Selection (A&S) Course:
To be completed]	prior to member being assigned to A&S:
ind	W/SO Duty Medical Examination physical completed within 18 months, to include all waivers if icated and signed by an Undersea Medical Officer (UMO). *Q for dive does not constitute disqualification for MARSOC.
	s a current Periodic Health Assessment (PHA) which will not expire upon the appletion of A&S.
COI	outstanding medical conditions have been reviewed and evaluated. Specialists have been insulted if applicable and the candidate has been placed on FIT FOR FULL DUTY(FFD) status for icial operations training.
participate in the Ass	(Circle one) (Circle one) am currently in excellent/good/fair/poor health and I am willing/not willing to sessment and Selection Course. I have no medical issues at this time. I also understand that if this eleted I will not be able to participate in an A&S course.
	Medical Representative:
Signature/Print Nam	e/Date Signature/Print Name/Date
	Medical Representative POC:
	Name:
1. U.S. Navy N 136. 2. Army Regul 3. ACN to OP! Who can perform an performed by any ph	& POC ABOVE ATTEST TO THE VERIFICATION OF A NSW/SO DUTY MEDICAL HYSICAL BEING COMPLETED PER THE BELOW REFERENCES. [AVMED P-117, Manual of the Medical Department, chapter 15, Sections 32 through 61, 102, 105, and ation 40-501, Standards of Medical Fitness, Chapters 5 through 8. NAVINST 6400.1C, dated SEP 2009. ** ** **NSW/SO Duty Medical Examination?** The NSW/SO Duty Medical Examination physical may be systician. However, it must be reviewed for completeness and accuracy, and then countersigned by an afficer (UMO). Physician's assistants, nurse practitioners, and independent duty corpsmen are not